



CORRECT SITE SURGERY/PROCEDURES SUCCESSFUL PRACTICES IN GEORGIA

PATIENT IDENTIFICATION

Essential Elements for Patient Identification Policies and Procedures

Rationale: Correct patient identification ensures that the patient is receiving the correct treatment, surgery, or procedure intended for their care to achieve optimum outcomes

It is recommended that hospitals use the same minimal elements in procedures for patient identification throughout their organization. The recommended minimal elements are as follows:

1. Specify the points of care when staff should check patient identification throughout the hospital and for procedures from the pre-op to the post-operative process. The points to include are when:
 - Scheduling the planned patient treatment procedure either from outside the hospital or from one area of the hospital to another.
 - Admitting the patient to the facility.
 - Initiating healthcare treatment including medication administration, drawing of blood for laboratory studies, etc.
 - Administering sedation, with the patient awake and aware, if possible
 - Transferring the patient from one unit or caregiver to another unit or caregiver, and specifically when transferring to the pre-op or holding room, and the operating or procedure room.
 - Calling the “time-out” prior to the surgical incision or start of an invasive procedure.

Suggestions:

- Both the staff handing-off and the staff receiving the patient should be assigned responsibility for patient identification at the time of transfer.
2. Specify the unique identifiers that staff can use to be sure they have the correct patient for any scheduled treatment or procedure. Use at least two unique identifiers, and be clear on the ones selected for use throughout your organization.

Suggestions:

- Standardize policy to use the same identifiers throughout the organization
- Identifiers currently used by hospitals in Georgia are patient's:
 - Name
 - Date of Birth
 - Medical Record Number
 - Social Security Number
 - Hospital Financial Account Number
 - Picture Taken at Registration (see tip below)
- For situations when two patients have the same or similar names and birth dates include a requirement for an ‘alert’ and an additional identifier. For example, place a name-alert on the patient’s chart and on the surgery schedule in the operating room.



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3. Require that staff ask the patient, if conscious, to state their name and hospital specific identifiers that are known to patient (e.g. birth date or SSN) and confirm the information given with the patient's armband and chart and any other documents accompanying the patient.

Suggestions:

- For pediatric patients, have the parent/guardian confirm patient identification by either saying the child's name and birth date and/or asking for agreement. If the parent/guardian is not available for confirming the pediatric patient's identification, have two staff members confirm the two unique patient identifiers.
4. Require that if the patient is unconscious, staff confirm the patient's armband identifying information with the chart and any other documents accompanying the patient.

Suggestions:

- For unconscious or confused patients use the caregiver accompanying the patient, if there is one, to confirm identification prior to surgery or invasive procedures. If a caregiver is not available for confirming the patient's identification, have two staff members confirm the two unique patient identifiers and require the two staff members' signatures confirming the identification.
5. Specify the procedures to be used for establishing unique identifiers for a patient who comes to the hospital unconscious/confused and unidentified.

Suggestions:

- Coordinate with your local EMTs to establish a system that will work for them and for your organization
 - For trauma patients without known identity – have EMTs establish an 'identity' immediately in the field by a system pre-arranged with the hospital. Continue use of the same 'identifiers' when the patient arrives at the hospital
 - If the patient is not arriving by EMS, have your system clearly in place for establishing an 'identity' immediately upon arrival at the hospital.
6. Specify when staff would be required to document completion of the patient identification process.
 7. Specify the procedure to be used if a discrepancy is identified during the patient identification process. Consider moving to a third or fourth identifier.



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TIPS FOR POLICY AND PROCEDURE IMPLEMENTATION:

- Use consistent and attention-getting posters in all patient care areas reminding staff to use the required patient identification process.
- Include a brightly colored laminated card or notice with each chart reminding staff to verify the patient's identity.
- Include the patient identification process in orientation and annual competency training for all staff
- Design forms for all parts of the organization to have a section for documenting that ID was confirmed, and a place for initials of the person performing the patient ID process.
- Beware of use of pictures, as patients often don't look the same at the time of admission as they do during their hospital stay. If pictures are used, they should be in addition to two other identifiers.

These strategies are a compilation of certain methods or procedures that were found to be effective when implemented by some hospitals. They may incorporate certain standards of accrediting agencies such as JCAHO but are not intended to establish a legal standard of care. A hospital may wish to consult with their own attorney to determine if there are any additional criteria that they should consider in order to comply with applicable federal and state laws.